

COUNCIL COMMUNICATION

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	AGENDA TITLE:	Communications	(February 9, 1995 through F	ebruary 21, 1995)	
	MEETING DATE:	March 1, 1995			
	PREPARED BY:	City Clerk			

	RECOMMENDED	ACTION: No ac	ction - information only.		
	BACKGROUND IN	FORMATION:		or Alcoholic Beverage Control License e State of California Department of ol for the following:	
	a) Dodie Licen		, 2430 West Kettleman Lane	, Lodi, Off Sale General, Original	
	2430 West Kettlem type of Alcoholic Be			This is an appropriate zoning for this	;
	FUNDING:	None required.			
			Jacquelin Acting Cit	e L. Taylor y Clerk	

APPROVED: ___

JLT

Attachments





RECEIVED 95 FEB 17 AM 8: 12

APPLICATION FOR ALCOHOL BEVERAGE LICENSE(S)

Department of Alcoholic Beverage Control 31 East Channel Street, Room 168 P.O. Drawer 150 Stockton, CA 95201 (209) 948-7739

File Number...........302604 Receipt Number......1010282, 1021652 Geographical Code.....3902 Copies Mailed Date 2-15-95Issued Date

DISTRICT SERVING LOCATION:

Name of Business: Location of Business:

Number and Street City, State Zip Code County

Is premise inside city limits?

Mailing Address: (If different from premise address)

If premise licensed: Type of license Transferor's names/license: STOCKTON

FOOD 4 LESS

2430 W KETTLEMAN LN **LODI CA 95242** SAN JOAQUIN YES

255 E MARCH LN STOCKTON CA

License Type	Transaction Type	Fee Type	Master	Dup	<u>Date</u>	<u>Fee</u>
1. 21 OFF-SALE GENERAL	ANNUAL FEE	NA	YES	0	FEB 15,1995	\$446.00 :
					TOTAL	\$446.00

Have you ever been convicted of a felony? NO

Have you ever violated any provisions of the Alcoholic Beverage Control Control Act, or regulations of the department pertaining to the Act? NO

Explain any "Yes" answer to the above questions on an attachment which shall be deemed part of this application

Applicant agrees (a) that any manager employed in on-sale licensed premise will have all the qualifications of a licensee, and (b) that he will not violate or cause or permit to be violated any of the provisions of the Alcoholic Beverage Control Act.

STATE OF CALIFORNIA

County of SAN JOAQUIN

Date FEB 15,1995

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is an applicant, or one of the applicants, or an executive officer of the applicant corporation, named in the foregoing application, duly authorized to make this application on its behalf; (2) that he has read the foregoing and knows the contents thereof and that each of the above statements therein made are true; (3) that no person other than the applicant or applicants has any direct or indirect interest in the applicant or applicant's business to be conducted under the license(s) for which this application is made: (4) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety (90) days preceding the day on which the transfer application is filled with the Department or to gain or establish a preference to or for any creditor or transferor or to defraud or injure any creditor of transferor; (5) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

Applicant Name(s)

Applicant Signature(s)

DODIE INC